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alcohol, malaria and lymphadenoma; in the fifth, probably retrogressive metamorphosis of a fibroma; in the sixth the etiology was doubtful, although alcohol may have had some influence.

The six cases were observed in two years. The first, third and sixth cases recovered, the other three died.

Ein Fall von polyneuritische Psychose mit Autopsie. S. S. KORSAKOFF UND W. SERBSKI, Arch. f. Psych., 1891, xxii Band, 1 Heft; 112-134.

The psychosis in this case followed a laparotomy for the removal of a dead fœtus in a case of extrauterine pregnancy. A septic fever developed before the operation, after which the temperature fell perceptibly, although it always remained high.

A week after the operation, in addition to the irritability manifested earlier, there was considerable excitement and a clearly marked weakness of memory for recent events. Consciousness was clear in the beginning, but soon began to be clouded, and at the same time symptoms of weakness in the extremities developed, the tendon reflex disappeared, and the symptoms of multiple neuritis developed.

Although the wound healed the affection of the nervous system increased; the disturbance of memory became more marked, the association of ideas was completely lost, from time to time there was excitement, and hallucinations developed. The paralysis increased, and extended to the upper part of the body, and the patient died from paralysis of the diaphragm. As in the previous cases Korsakoff attributes the disease to the poisoning of the central and peripheral nervous system by the ptomaines circulating in the blood. At the autopsy the characteristic degenerative changes of multiple neuritis were found. The phenomena of multiple degenerative neuritis were found in all the nerves examined with the exception of some cranial nerves. The muscles showed evidences of a degeneration of an irritative character—increased number of nuclei. In the brain nothing was found by the methods used, but Korsakoff thinks that the failure to find any changes in the brain was to be accounted for by the fact that the mental disturbance had existed in the patient only a relatively short time, and that the anatomical substratum of the disturbance did not have time to develop to a sufficient degree to become evident by the methods of investigation employed; possibly also because the cortex was not examined by all the methods.

Korsakoff does not think that the negative result justifies the assumption that the mental disturbances in multiple neuritis is unaccompanied by any changes in the cortex, but he is much more of the view that these changes exist in many cases, and cites as a proof that in his observations on alcoholic neuritis where a characteristic mental disturbance was present a change in the cortex was found, viz: alteration of the vessels, millary extravasations, increase of the connective tissue and spindle cells.

Polyneuritis und Geistesstörung. ERNST FRANK. Inaugural Dissertation, University of Bonn, 1890.

Frank reports a case of mental disturbance, to which the phenomena of polyneuritis were added very early. The clinical picture is very similar to the psychoses described by other authors as occurring in multiple neuritis, although some of the symptoms usually present in these psychoses were absent in this case. The author quotes Korsakoff's description of the mental condition. Frank's case presented especially the peculiar disturbance of memory described by Ross. While in almost all cases of psychoses in multiple neuritis, as described by Korsakoff and others, there are still other phenomena, such as delusions, hallucinations, illusions, stupor, and even well-marked delirium tremens, yet these

according to Frank, only develop in alcoholic multiple neuritis, or in those cases which are due to infection or other form of intoxication. The question arises whether it is necessary to look for the origin of such disturbances in a pathological and anatomical change in the brain, as has been done by many, or if the outbreak of psychoses in multiple neuritis may be explained without such an assumption.

Tilling holds that such a direct and anatomically provable disease of the brain exists in consequence of the same injurious conditions which affect the peripheral nerves. Tilling's explanation, according to Frank, holds good only of cases of alcoholic polyneuritis, and whether in such cases such an explanation of the connection between psychical disturbance and mental disease may be disputed; at all events, autopsies made up to this time speak against this. Spinal changes, at least such as would correspond to the clinical phenomena, have never been found, not even in cases of alcoholic ataxia, the so-called alcoholic pseudo-tabes. On reviewing the evidence advanced by different writers Frank comes to the conclusion that such cases present no anatomically demonstrable lesion of the brain, but that the psychosis depends on such disturbances of the central organ as are usually called functional, in which with our present means of investigation no anatomical change in the brain is demonstrable. With regard to the question of *Beri-Beri* the author draws the generally accepted conclusion that such cases are due to infection. After a general review of the literature Frank concludes that his own case of polyneuritis without alcoholism, infection or intoxication is the sole one of the kind in literature. The psychosis was, however, characteristic throughout, and in its individual phenomena not less intense than those cases of psychoses developing in polyneuritis on an infectious or toxic basis. The etiology is sufficiently explained by the poor conditions of life to which the patient was subject for a year before the attack. Frank claims that his case shows that polyneuritis with mental disturbance may develop without one being able to allege as a cause either an infection, or even a special disease—the "*cerebropathie psychica toxaemica*," and that the pathological findings up to this time afford no special explanation of the psychosis in a primary pathologico-anatomical change in the brain. It results therefore that it is not simply toxaemic influences to whose influence on the peripheral nervous system polyneuritis owes its origin, and that in his case any such source, as well as epilepsy, senility and trauma must be excluded, and the only source to be sought is in the poor manner of living, which together with the small and minute injuries to the peripheral nerves is sufficient to call out the disease.

On the Psychical Disorders of Multiple Neuritis. JAMES ROSS. *Journal of Mental Science*, April, 1890.

Except in a few idiopathic cases multiple neuritis is due to the action of some poison,—diphtheria, septicemia, typhoid and other fevers, syphilis and tubercle; vegetable poisons like morphia; diffusible stimulants,—alcohol, bi-sulphide of carbon, di-nitro benzole, and the fumes of naphtha and other agents used in special manufactures; endogenous poisons, like those generated in rheumatism, gout and diabetes; metallic poisons, lead, phosphorous, arsenic and mercury. Multiple neuritis also accompanies many diseases like cancer, Addison's disease, exthalmic goitre, chorea, chlorosis, hæmoglobinuria, pernicious anæmia, and other diseases attended by great impoverishment of the blood. Some degree of neuritis also probably follows after severe shocks to the nervous system from injuries or moral causes. Whatever the cause of this form of neuritis it is likely to be attended by psychical disorders which have in all cases a certain family likeness; the best marked examples are in the poisoning by morphia, alcohol and other diffusible stimulants.

Ross divides the psychical disorders of multiple neuritis into four